## Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FFE and PUBLICATION FFE (if required). Blocks 1 through 5 should be completed where

CURRENT CORRESPONDENCE ADDRESS (Noze: Use Block I for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanyin papers. Each additional paper, such as an assignment or formal drawing, muchave its own certificate of mailing or transmission.			
39170 HITACHI AM 50 PROSPECT LEGAL DEPT.	IERICA, LTD.	34/2006		Cor	officate of Mailing	r Trans	
TARRYTOWN	, NY 10591		Г				(Depositor's rame)
							(Signature)
							(Date
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKE	T NO.	CONFIRMATION NO.
10/027.934 12/20/2001			Yunbino Wang		HAL 193	2568	
APPLN. TYPE	SMALL ENTITY NO	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE		DATE DUE 11/06/2006
<u>-</u>	DIFF	ART UNIT	CLASS-SUBCLASS	1			
			I	l			
		2626	704-233000				
. Change of correspondence address or indication of "Fee Address" (37 FR 1.63).  TR 1.63).  Change of correspondence address (or Change of Correspondence Address form PTOSB1/2) attached.  Justice of Correspondence address (or Change of Correspondence Address form PTOSB1/2) attached.  The Address 'indication (or "Fee Address" Indication form PTOSB1/47; Rev 03-02 or more recent) attached. Use of a Customer Number Is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or a gents UR, alternatively, (2) the same of a single firm (having as a member a registered attorney or agent) and the autors of up to  15 the control of the co				
ASSIGNEE NAME A	ND RESIDENCE DAT	A TO BE PRINTED ON	THE PATENT (print or typ	e)			
			data will appear on the pa T a substitute for filing an a		is identified below	v, the do	cument has been filed for
(A) NAME OF ASSIC			(B) RESIDENCE: (CITY				
Renesas Tec	hnology Corporat	ion	Tok	yo, Japan			
ease check the appropri	ate assignee category or	categories (will not be pr	inted on the patent):	Individual 🛭 Con	poration or other pri	vate grou	p entity Government
a. The following fee(s) a	re submitted:	41	. Payment of Fee(s): (Pleas	se first reapply any	previously pald is:	suc fee sl	nown above)
Issue Fcc	small entity discount p		A check is enclosed.  Payment by credit card	F 9TO 2029			
Advance Order - #		ermaco)	The Director is hereby	authorized to charge	the required fee(s).	any defi	ciency, or credit any
			overpayment, to Depos	it Account Number	05-0150 (en	close an	extra copy of this form).
	as (from status indicated		☐ b. Applicant is no long	er claimine SMALI	ENTITY status. Se	e 37 CFF	R 1.27(g)(2).
	SMALL ENTITY state						(8)(-)
a. Applicant claims			from anyone other than th	e applicant; a regist	ered attorney or age	nt; or the	assignee or other party in
			from anyone other than the		ober 31, 2006	nt; or the	assignee or other party in

an application. Confidentially is governed by \$5 U.S.C. 122 and 37 CPR 1.4 This collection is estimated to be plante white is be lief uplow which is be lief uploy by the USF 10 D replanting, preparing, and submitting the completed applications form to the USF 10.7 The rel will very depending upon the individual case. Any comments on the amount of time you require to complete from the other upon the confidence of the confid

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.